

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Jobs, Freedom, and Security PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00536540	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Prime Media Partners</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 05 / 2018</b>		
Mailing Address <b>4201 Wilson Blvd #110-126</b>			Amount <b>8752.75</b>		
City <b>Arlington</b>	State <b>VA</b>	Zip Code <b>22203</b>	Transaction ID : <b>SB24.1001</b>		
Purpose of Expenditure <b>MEDIA</b>		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 02 / 2018</b>		
Name of Federal Candidate <b>Wright, Jason, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>05</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>67436.75</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>Ax Media</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>02 / 05 / 2018</b>		
Mailing Address <b>1251 NW Briarcliff Pkwy Suite 85</b>			Amount <b>58684.00</b>		
City <b>Kansas City</b>	State <b>MO</b>	Zip Code <b>64116</b>	Transaction ID : <b>SB24.1002</b>		
Purpose of Expenditure <b>MEDIA</b>		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY <b>02 / 02 / 2018</b>		
Name of Federal Candidate <b>Wright, Jason, , ,</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>05</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>TX</b>		
Calendar Year-To-Date Per Election for Office Sought		<b>67436.75</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>67436.75</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hobbs, Cabell, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**02 / 05 / 2018**

Signature

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M M M	/	D D D	/	Y Y Y Y Y Y									

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M M M	/	D D D	/	Y Y Y Y Y Y									
02		05		2018									
Mailing Address 4201 Wilson Blvd #110-126		Amount <table border="1"> <tr> <td colspan="5">8664.56</td> </tr> </table>		8664.56									
8664.56													
City Arlington	State VA	Zip Code 22203	Transaction ID : <b>SB24.1003</b>										
Purpose of Expenditure Media	Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>02</td> <td></td> <td>2018</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		02		2018
M M M	/	D D D	/	Y Y Y Y Y Y									
02		02		2018									
Name of Federal Candidate Montenegro, Steve, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>AZ</u>										
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶											

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M M M	/	D D D	/	Y Y Y Y Y Y									
02		05		2018									
Mailing Address 1251 NW Briarcliff Pkwy Suite 85		Amount <table border="1"> <tr> <td colspan="5">75004.00</td> </tr> </table>		75004.00									
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City Kansas City	State MO	Zip Code 64116	Transaction ID : <b>SB24.1004</b>										
Purpose of Expenditure Media	Category/ Type	Date of Disbursement or Obligation <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>01</td> <td></td> <td>2018</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		01		2018
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(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5">83668.56</td> </tr> </table>	83668.56				
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(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<table border="1"> <tr> <td colspan="5"></td> </tr> </table>					
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M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2018

Signature